B1 (Official Form 1)(1/08)								4419
	States Ba stern Distric			,			Voluntary	y Petition
Name of Debtor (if individual, enter Last, First, Middle): Donnelly, Michael J.				e of Joint Do	ebtor (Spouse	e) (Last, First,	Middle):	
All Other Names used by the Debtor in the last (include married, maiden, and trade names): AKA Michael J. Donnelly DDS	8 years					Joint Debtor i trade names)	in the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxp (if more than one, state all)	oayer I.D. (ITIN)	No./Complete l	EIN Last	four digits ore than one, s	f Soc. Sec. of state all)	r Individual-7	Гахрауег I.D. (ITIN) I	No./Complete EIN
Street Address of Debtor (No. and Street, City, 6 Cobblestone Lane Lake Grove, NY	and State):			t Address of	f Joint Debtor	r (No. and Str	reet, City, and State):	
		ZIP Cod 11755	e					ZIP Code
County of Residence or of the Principal Place	of Business:	111100	Coun	ty of Reside	ence or of the	Principal Pla	ace of Business:	
Suffolk								
Mailing Address of Debtor (if different from st	reet address):		Maili	ng Address	of Joint Deb	tor (if differer	nt from street address):
		ZIP Cod	<u>e</u>					ZIP Code
Location of Principal Assets of Business Debto (if different from street address above):	DΓ	'						
Type of Debtor	Na	ture of Busines	is		Chapter	r of Bankrup	tcy Code Under Wh	ich
(Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities,	☐ Health Ca☐ Single Ass	set Real Estate a C. § 101 (51B) er ty Broker	as defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ Ch of ☐ Ch of	napter 15 Petition for a Foreign Main Proce napter 15 Petition for a Foreign Nonmain F	eeding Recognition
check this box and state type of entity below.)	Tax	-Exempt Entit				(Check	one box)	
	☐ Debtor is under Title	ck box, if applicate a tax-exempt or e 26 of the Unit Internal Revenu	ganization ed States	defined	d in 11 U.S.C. ed by an indiv	onsumer debts, § 101(8) as idual primarily household pur	busi	ots are primarily iness debts.
Filing Fee (Check of Full Filing Fee attached ☐ Filing Fee to be paid in installments (applicattach signed application for the court's consist unable to pay fee except in installments.	cable to individual	ing that the del	Chec	Debtor is k if: Debtor's	not a small b	ousiness debto	defined in 11 U.S.C. or as defined in 11 U.S. or quidated debts (exclu	S.C. § 101(51D).
☐ Filing Fee waiver requested (applicable to a attach signed application for the court's con				l Acceptan	being filed w	vith this petition on were solicit accordance w	on. ted prepetition from o vith 11 U.S.C. § 1126	one or more $G(b)$.
	*** Ronald D.					THIS	SPACE IS FOR COUR	Γ USE ONLY
■ Debtor estimates that funds will be availabl □ Debtor estimates that, after any exempt pro there will be no funds available for distribu	perty is excluded	l and administra		ses paid,				
Estimated Number of Creditors	uon to unsecured	r creditors.				1		
1- 50- 100- 200- 49 99 199 999	1,000- 5,000 5,00		□ 25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets So to \$50,001 to \$500,001 to \$500,000 to \$100,000 to \$100,00	\$1,000,001 \$10,00 to \$10 to \$50 million million		\$100,000,000 to \$500 million	5500,000,001 to \$1 billion				
Estimated Liabilities	\$1,000,001 \$10,00 to \$50 to \$50	00,001 \$50,000,001 to \$100	\$100,000,000 to \$500	5500,000,001 to \$1 billion				

4419

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Donnelly, Michael J. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ Ronald D. Weiss October 17, 2008 Signature of Attorney for Debtor(s) (Date) Ronald D. Weiss 4419 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

4419

B1 (Official Form 1)(1/08) Page 3 Name of Debtor(s): Voluntary Petition Donnelly, Michael J. (This page must be completed and filed in every case) **Signatures** Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition petition is true and correct. is true and correct, that I am the foreign representative of a debtor in a foreign If petitioner is an individual whose debts are primarily consumer debts and proceeding, and that I am authorized to file this petition. has chosen to file under chapter 7] I am aware that I may proceed under (Check only one box.) chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief ☐ I request relief in accordance with chapter 15 of title 11. United States Code. available under each such chapter, and choose to proceed under chapter 7. Certified copies of the documents required by 11 U.S.C. §1515 are attached. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b). ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting I request relief in accordance with the chapter of title 11, United States Code, recognition of the foreign main proceeding is attached. specified in this petition. X /s/ Michael J. Donnelly Signature of Foreign Representative Signature of Debtor Michael J. Donnelly Printed Name of Foreign Representative Signature of Joint Debtor Date Telephone Number (If not represented by attorney) Signature of Non-Attorney Bankruptcy Petition Preparer October 17, 2008 I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for Date compensation and have provided the debtor with a copy of this document Signature of Attorney* and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services X /s/ Ronald D. Weiss chargeable by bankruptcy petition preparers, I have given the debtor notice Signature of Attorney for Debtor(s) of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Ronald D. Weiss 4419 Official Form 19 is attached. Printed Name of Attorney for Debtor(s) Ronald D. Weiss, P.C. Printed Name and title, if any, of Bankruptcy Petition Preparer Firm Name 734 Walt Whitman Road Suite 203 Social-Security number (If the bankrutpcy petition preparer is not Melville, NY 11747 an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition Address preparer.)(Required by 11 U.S.C. § 110.) Email: weiss@ny-bankruptcy.com (631)271-3737 Fax: (631)271-3784 Telephone Number October 17, 2008 Address Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Date Signature of Debtor (Corporation/Partnership) Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition Names and Social-Security numbers of all other individuals who prepared or on behalf of the debtor. assisted in preparing this document unless the bankruptcy petition preparer is The debtor requests relief in accordance with the chapter of title 11, United not an individual: States Code, specified in this petition. Signature of Authorized Individual If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. Printed Name of Authorized Individual A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in Title of Authorized Individual

Date

fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S): \blacksquare	Michael J. Donnelly C	CASE NO.:
Pursuant to L concerning Related Ca	Local Bankruptcy Rule 1073-2(b), the debtor (or any other petition Cases, to the petitioner's best knowledge, information and belief:	oner) hereby makes the following disclosure
was pending at any ting spouses or ex-spouses; partnership and one or have, or within 180 da	the deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-10 me within six years before the filing of the new petition, and the distriction of the affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners; (vi) are partnerships which share of any of the commencement of either of the Related Cases had, an instate under 11 U.S.C. § 541(a).]	lebtors in such cases: (i) are the same; (ii) are leral partners in the same partnership; (v) are a lead or more common general partners; or (vii)
NO RELATED CA	ASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.	
☐ THE FOLLOWING	NG RELATED CASE(S) IS PENDING OR HAS BEEN PENDIN	G:
I. CASE NO.:	JUDGE: DISTRICT/DIVISION:	
	ING (Y/N): [If closed] Date of closing:	
CURRENT STATUS	S OF RELATED CASE:(Discharged/awaiting discharged	
	(Discharged/awaiting discharged)	ge, confirmed, dismissed, etc.)
	CH CASES ARE RELATED (Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") RELATED CASE:) WHICH WAS ALSO LISTED IN
2. CASE NO.:	_ JUDGE: DISTRICT/DIVISION:	
	ING (Y/N): [If closed] Date of closing:	
CURRENT STATUS	S OF RELATED CASE:(Discharged/awaiting discharged	
	(Discharged/awaiting discharged)	ge, confirmed, dismissed, etc.)
MANNER IN WHIC	CH CASES ARE RELATED (Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") RELATED CASE:) WHICH WAS ALSO LISTED IN
3. CASE NO.:	_ JUDGE: DISTRICT/DIVISION:	
CASE STILL PENDI	ING (Y/N): [If closed] Date of closing:	_
CURRENT STATUS	S OF RELATED CASE:	ge, confirmed, dismissed, etc.)
	(Discharged/awaiting discharged)	ge, confirmed, dismissed, etc.)
MANNER IN WHIC	CH CASES ARE RELATED (Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") RELATED CASE:) WHICH WAS ALSO LISTED IN

(OVER)

DISCLOSURE OF RELATED CASES (cont'd)

NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file.

TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE:

I am admitted to practice in the Eastern District of New York (Y/N): ___Y__

CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/petitioner's attorney, as applicable):

I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form.

Ronald D. Weiss Ronald D. Weiss 4419 Signature of Debtor's Attorney Ronald D. Weiss, P.C. 734 Walt Whitman Road Suite 203 Melville, NY 11747 (631)271-3737 Fax:(631)271-3784 Mailing Address of Debtor/Petitioner City, State, Zip Code

Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-2 Rev.02/15/1

Officia	l Form 1, Exhibit D (10/06)				
		United States Bankruptcy Co Eastern District of New York	ourt		4419
In re	Michael J. Donnelly		Case No.		
	-	Debtor(s)	 Chapter	13	

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Michael J. Donnelly
	Michael J. Donnelly
Date: October 17, 2008	

B6A (Official Form 6A) (12/07)

441	9
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In re	Michael J. Donnelly	Case No.	
-	•	D.14	
		Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Single Family Residence (Former Primary Residence) Location: 6 Cobblestone Lane, Lake Grove NY (To be transferred to wife in Divorce Stipulation)	Jointly Owned w/Ex	-Wife -	640,000.00	627,000.00
Single Family Rental Property 42 Washburn Street, Lake Grove NY 11755	Jointly owned w/Ex-	Wife -	300,000.00	297,855.00

Sub-Total > **940,000.00** (Total of this page)

Total > **940,000.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

441	9
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In re	Michael J. Donnelly	Case No.	
-	-	Dobtor ,	
		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on hand	-	200.00
2.		Chase Bank - checking account	-	2,500.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Chase Bank - savings account	-	1,000.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household goods and furnishings	-	2,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Wearing apparel	-	2,500.00
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	X		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Term Life Insurance - NO CASH VALUE	-	0.00
10.	Annuities. Itemize and name each issuer.	X		

2 continuation sheets attached to the Schedule of Personal Property

8,700.00

Sub-Total >

(Total of this page)

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

4419

In re	Michael J. Donnelly	Case No
_		,

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.		President & 100% Shareholder of Michael J. Donnelly DDS PC Corporation active from 1994 to Present; Dental chairs & equipment over 30 years old; moderate amount of claims.	-	20,000.00
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			(Tota	Sub-Total of this page)	al > 20,000.00
			· ·	10,	

Sheet __1__ of __2__ continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

4419

In re Michael J. Donnelly

Case No.

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	dar	3 Four Winds Chateau 31P Class C RV; (body naged) (financed) - client is presently separated n wife and uses RV as his home	-	20,000.00
			9 Dodge Grand Caravan (driven by wife to be en in divorce)	-	1,000.00
		199	7 Dodge Neon	-	500.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			
			an	Sub-Tota	al > 21,500.00
			(Total	of this page)	al > 50,200.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (12/07)

(Check one box)

<u>Household Goods and Furnishings</u> Household goods and furnishings

Debtor claims the exemptions to which debtor is entitled under:

4419

2,500.00

☐ Check if debtor claims a homestead exemption that exceeds

2,500.00

In re	Michael J. Donnelly	Case No.	

Debtor

\$136,875.

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
NYCPLR § 5206(a)	13,000.00	640,000.00
	Each Exemption	Each Exemption Claimed Exemption

 Wearing Appare!
 NYCPLR § 5205(a)(5)
 2,500.00
 2,500.00

NYCPLR § 5205(a)(5)

Automobiles, Trucks, Trailers, and Other Vehicles
2003 Four Winds Chateau 31P Class C RV: Debtor & Creditor Law § 282(1) 2 400 00 20 000 00

2003 Four Winds Chateau 31P Class C RV; Debtor & Creditor Law § 282(1) 2,400.00 20,000.00 (body damaged) (financed) - client is presently separated from wife and uses RV as his home

Total: 20,400.00 665,000.00

B6D (Offic	ial Form 6D) (12/07)			4419
In re	Michael J. Donnelly		Case No.	
•	<u> </u>	Debtor		

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 99001957			10/2006	▎▔	T E D			
Banco Popular North America c/o Jaspan Schlesinger Hoffman LLP 300 Garden City Plaza Garden City, NY 11530		-	Business Line of Credit business loan; arrears on \$1,600/mth since apprx 5/2008; secured by dental office at 914 Wheeler Rd Hauppauge NY; apprx reinstatement \$11,000					
			Value \$ 20,000.00				55,000.00	35,000.00
Account No. 666224	4		Business Line of Credit					
Banco Popular North America c/o Jaspan Schlesinger Hoffman LLP 300 Garden City Plaza 5th Floor Garden City, NY 11530		-	business line; arrears on apprx \$600/mth apprx reinstatement \$4,000; secured by dental office at 914 Wheeler Rd Hauppauge NY					
Garden Gry, WT 11000			Value \$ 20,000.00				19,000.00	0.00
Account No. 357580471			6/2003					
Bank of the West 1450 Treat Blvd Walnut Creek, CA 94596		-	15 year Auto Loan against RV 2003 4 Winds Chateau 31P Class C RV; current on \$382.24/mth; Solely liable					
			Value \$ 20,000.00	1			15,787.00	0.00
Account No. 4650024418113 Chase Financial 10790 Rancho Berna San Diego, CA 92127	x	_	2007 30 year Fixed Mortgage (1st 2 yrs interest only) Single Family Residence (Former Primary Residence);6 Cobblestone La, Lake Grove NY; 3 mths arrears on \$6,596/mth(w/escrows) apprx reinstatement \$21,000; Jointly liable					
			Value \$ 640,000.00				627,000.00	0.00
_1 continuation sheets attached	-		(Total of t		otal		716,787.00	35,000.00

 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

				4419
In re	Michael J. Donnelly		Case No	
•		Debtor ,		

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLLQULDA	SPUTE	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 8740107966327			2003	٦	D A T E D			
Citibank Financial 10801 6th Street Rancho Cucamonga, CA 91730	x	-	30 year Fixed Mortgage Single Family Rental Property;42 Washburn St, Lake Grove NY; 3 months arrears on \$2,915/mth (w/escrows) appro- reinstatement \$10,000; Jointly liable w/ex-wife; Intends to surrender	<u> </u>	D			
	┸	L	Value \$ 300,000.00				297,855.00	0.00
Account No.	$\frac{1}{1}$							
			X7.1. (b)					
Account No.	╀	╀	Value \$	+	⊢			
			Value \$	1				
Account No.								
	╀	╀	Value \$	\perp	_			
Account No.			Value \$					
Sheet 1 of 1 continuation sheets atta		d t)	Sub			297,855.00	0.00
Schedule of Creditors Holding Secured Claim	S		(Total of	his	pag	e)	,	
			(Report on Summary of S		Γota dule		1,014,642.00	35,000.00

		4419
n re	Michael J. Donnelly	Case No.
		Debtor
	SCHEDULE E - CREDITORS	HOLDING UNSECURED PRIORITY CLAIMS
to pri accou continuo so. If Do no scheoliable colum "Disp "Tota also continuo son total de Colum total de Colu	ority should be listed in this schedule. In the boxes provided ant number, if any, of all entities holding priority claims again nuation sheet for each type of priority and label each with the The complete account number of any account the debtor has a minor child is a creditor, state the child's initials and the na of disclose the child's name. See, 11 U.S.C. §112 and Fed. R. If any entity other than a spouse in a joint case may be jointly dule of creditors, and complete Schedule H-Codebtors. If a joint each claim by placing an "H," "W," "J," or "C" in the column labeled "Contingent." If the claim is unliquidated, place an wited." (You may need to place an "X" in more than one of the Report the total of claims listed on each sheet in the box labeled "On the last sheet of the completed schedule. Report this tot Report the total of amounts entitled to priority listed on each on this Schedule E in the box labeled "Totals" on the last shouthe Statistical Summary of Certain Liabilities and Related Report the total of amounts not entitled to priority listed on each stylisted on this Schedule E in the box labeled "Totals" on the last shouthe Statistical Summary of Certain Liabilities and Related Report the total of amounts not entitled to priority listed on each stylisted on this Schedule E in the box labeled "Totals" on the last shouthe Statistical Summary of Certain Liabilities and Related the Statistical Summary of Certain Liabilities	with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do the and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Bankr. P. 1007(m). Bankr. P. 1007(m). I liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate int petition is filed, state whether the husband, wife, both of them, or the marital community may be lumn labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled rese three columns.) led "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled al also on the Summary of Schedules. sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority eet of the completed schedule. Individual debtors with primarily consumer debts report this total Data. ach sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to e last sheet of the completed schedule. Individual debtors with primarily consumer debts report this ated Data. iority claims to report on this Schedule E.
TYP	PES OF PRIORITY CLAIMS (Check the appropriate b	ox(es) below if claims in that category are listed on the attached sheets)
\square D	Oomestic support obligations	
		y a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	extensions of credit in an involuntary case	
	claims arising in the ordinary course of the debtor's business of the order for relief. 11 U.S.C. § 507(a)(3).	or financial affairs after the commencement of the case but before the earlier of the appointment of a
_	Vages, salaries, and commissions	
repre		ce, and sick leave pay owing to employees and commissions owing to qualifying independent sales immediately preceding the filing of the original petition, or the cessation of business, whichever
	Contributions to employee benefit plans	
	Noney owed to employee benefit plans for services rendered whever occurred first, to the extent provided in 11 U.S.C. § 50°	within 180 days immediately preceding the filing of the original petition, or the cessation of business, 7(a)(5).
	Certain farmers and fishermen	
C	Claims of certain farmers and fishermen, up to \$5,400* per far	mer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals	
	claims of individuals up to \$2,425* for deposits for the purchasered or provided. 11 U.S.C. § 507(a)(7).	ase, lease, or rental of property or services for personal, family, or household use, that were not
■ T	axes and certain other debts owed to governmental	units
		d local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to maintain the capital of an insured of	lepository institution
C	claims based on commitments to the FDIC, RTC, Director of	the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal

 $\hfill\square$ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

___ continuation sheets attached

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (12/07) - Cont.

4419

In re	Michael J. Donnelly	Case No.	
_		Debtor	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) potential liability for withholding taxes Account No. Internal Revenue Service 0.00 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 3,000.00 3,000.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 3,000.00 3,000.00 Schedule of Creditors Holding Unsecured Priority Claims Total 0.00 (Report on Summary of Schedules) 3,000.00 3,000.00

B6F (Offici	ial Form 6F) (12/07)		4419
In re	Michael J. Donnelly	(Case No
-	<u> </u>	Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box is debtor has no elections nothing unsecure	Ju C	ıaııı	is to report on this senedule 1.					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	I DATE CLAUVEWAS INCURRED AND	N H L N G	л – Q ⊃ –	P U T F	S J T	AMOUNT OF CLAIM
Account No. 34999*****12343			1980	 	D A T		Ī	
AMEX POBox 297871 Fort Lauderdale, FL 33329		-	Credit Card		E D			18,417.00
Account No. 3732-776145-52001			credit card			Г	T	
AMEX PO Box 2855 New York, NY 10116-2855		-						5,186.00
Account No. 3725-385886-91005	H		Credit Card	+	П	t	+	
AMEX POBox 2855 New York, NY 10116-2855		-						10,367.77
Account No. 3715-468579-41002			Credit Card			Γ		
AMEX PO Box 2855 New York, NY 10116-2855		-						11,808.99
	_		<u> </u>	Subt	tota	ıl	\dagger	
continuation sheets attached			(Total of t)	45,779.76

B6F (Official Form 6F) (12/07) - Cont.

			4419
In re	Michael J. Donnelly	Case No.	
-	<u> </u>	Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	ļç	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	11)	ISPUTED	AMOUNT OF CLAIM
Account No. 02800018142			line of credit	Т	Ă T E		
Astoria Federal Savings PO Box 5704 Hicksville, NY 11802-5704		-			D		10,932.32
Account No. 012 89410-001-42	T		phone bill				
AT&T Mobility PO Box 537113 Atlanta, GA 30353-7113		-					395.78
Account No. 0075	T		1998	T			
Bank of America PO Box 7047 Dover, DE 19903	-	-	Credit Card				44,874.00
Account No. 7498	T		1987				
Bank of America PO Box 7047 Dover, DE 19903		-	Credit Card				14,624.00
Account No. 68271039929099			business line of credit				
Bank of America PO Box 535310 Atlanta, GA 30353-5310		<u>-</u>					51,874.72
Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of				Subt	ota	1	100 700 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his]	pag	e)	122,700.82

B6F (Official Form 6F) (12/07) - Cont.

			4419	
In re	Michael J. Donnelly		Case No.	
		, Debtor		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR UNLIQUIDATED CONTINGENT CREDITOR'S NAME, MAILING ADDRESS DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, W CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER J AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. С (See instructions above.) Account No. 749 90413 031389 **Credit Card Bank of America** PO Box 15019 Wilmington, DE 19886-5019 5,430.76 Account No. 749 47239 9497 49 **Credit Card Bank of America** PO Box 15019 Wilmington, DE 19886-5019 9,436.57 Account No. 4802-1324-1153-6660 **Credit Card** Capital One Visa PO Box 70884 Charlotte, NC 28272-0884 4,362.62 Account No. 4253-3133-5011-8801 **Credit Card** Chase Visa PO Box 15153 Wilmington, DE 19886-5153 11,949.41 Account No. 7671 0310 1255 2947 overdraft **Chase Overdraft** PO Box 15133 Wilmington, DE 19886-5153 2,334.77 Sheet no. 2 of 5 sheets attached to Schedule of Subtotal 33,514.13 Creditors Holding Unsecured Nonpriority Claims (Total of this page)

 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

				4419
In re	Michael J. Donnelly		Case No.	
		Debtor		

	1.			1.		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXHLXGUX	Q U I	D I S P U T E D	AMOUNT OF CLAIM
Account No. 4325-4202-0023-0274			Credit Card	Т	D A T E D		
Chase Visa PO Box 15153 Wilmington, DE 19886-5153		_			D		6,797.91
Account No. 4366-1030-1237-6689	T		Credit Card				
Chase Visa PO Box 15153 Wilmington, DE 19886-5153		_					4,196.64
Account No. 7001115103225454	┡		Credit Card	+		\vdash	7,100.04
Comp USA Retail Services PO Box 17298 Baltimore, MD 21297-1298	-	_					422.98
Account No. 6879450129001867194	t		Credit Card	+	\vdash		
Dell Financial Services PO Box 6403 Carol Stream, IL 60197-6403		-					4,318.70
Account No. 6011-0025-7553-4243	╀		Credit Card	-			7,510.70
Discover Card Services PO Box 30395 Salt Lake City, UT 84130-0395		_	Credit Card				7,010.71
Sheet no. 3 of 5 sheets attached to Schedule of	_			Sub	tota	ıl	20.740.04
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	22,746.94

 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

				4419
In re	Michael J. Donnelly		Case No	
-	•	Debtor ,		

	1.			1.		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH-ZGEZH	Q	DISPUTED	AMOUNT OF CLAIM
Account No. 6019180385711300	1		Credit Card	Т	E		
GE Money Bank PO Box 960061 Orlando, FL 32896-0061		-			D		8,088.75
Account No. 5499-4410-0549-9200	T		Credit Card				
GM Card HSBC Card Services PO Box 37281 Baltimore, MD 21297-3281		-					1,464.13
Account No. 6035320134759263	╀	┢	Credit Card	+	\vdash		1,10110
Home Depot Credit Services Processing Center Des Moines, IA 50364-0500		-	ordan dara				5,580.97
Account No. 3737-063932-12007	\dagger		Credit Card		H		
Optima Platinum Card PO Box 2855 New York, NY 10116-2855		-					7 400 45
Account No. F20074	╀	_	4002				7,408.15
Account No. 539871 Universal/Citi 8787 Baypines Jacksonville, FL 32201		-	1993 Credit Card				26,453.00
Sheet no4 _ of _5 _ sheets attached to Schedule of		_		Sub			40 005 00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	48,995.00

 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

			4419
In re	Michael J. Donnelly	Case No	
-		Debtor	

				_		_	
CREDITOR'S NAME,	CODEBTO	Hu	sband, Wife, Joint, or Community	C O N T I	U N	P	
MAILING ADDRESS	Ď	н	DATE CLAIM WAS INCURRED AND	N	ŀ	S	
INCLUDING ZIP CODE,	В	W	CONSIDERATION FOR CLAIM. IF CLAIM	H.	Q	Įυ	
AND ACCOUNT NUMBER	O	C	IS SUBJECT TO SETOFF, SO STATE.	I N	I۲	ΙĒ	AMOUNT OF CLAIM
(See instructions above.)	Ř	١	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NGENT	D	D	
Account No. 0800600			Credit Card	 	Î	DISPUTED	
	1			L	D		
Wells Fargo Financial							
PO Box 98784		-					
Las Vegas, NV 89193-8784							
							4,822.30
	L	┖		丄		_	7,022.00
Account No.							
	1						
				\bot		1	
Account No.	ı						
	-	┢		+		╀	
Account No.							
Account No.	┢	\vdash		+	\vdash	+	
Account No.	l	l					
	l	l					
	l	1					
Sheet no. <u>5</u> of <u>5</u> sheets attached to Schedule of	_	-	1	Sub	tota	1	
							4,822.30
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nıs	pag	ge)	
				7	Ota	al	
			(Report on Summary of So	che	lule	es)	278,558.95

B6G (Official Form 6G) (12/07)

4419

In re Michael J. Donnelly

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

Cynthia Donnelly
6 Cobblestone Lane
Lake Grove, NY 11755

Cynthia Donnelly
6 Cobblestone Lane
Lake Grove, NY 11755

Citibank Financial
10801 6th Street
Lake Grove, NY 11755

Rancho Cucamonga, CA 91730

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B6I (Official Form 6I) (12/07)

441	9
441	9

				4419
In re	Michael J. Donnelly		Case No.	
		Debtor(s)		

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS C	OF DEBTOR AND SP	OUSE		
Separated	RELATIONSHIP(S): Daughter Daughter Daughter Daughter	AGE(S): 10 12 21			
Employment:	DEBTOR		SPOUSE		
Occupation	President				
Name of Employer	Michael J. Donnelly DDS PC				
How long employed	14 1/2 years				
Address of Employer	914 Wheeler Road Hauppauge, NY 11788				
INCOME: (Estimate of average of	or projected monthly income at time case filed)		DEBTOR	Sl	POUSE
1. Monthly gross wages, salary, a	nd commissions (Prorate if not paid monthly)	\$	13,950.00	\$	N/A
2. Estimate monthly overtime		\$	0.00	\$	N/A
3. SUBTOTAL		\$	13,950.00	\$	N/A
4. LESS PAYROLL DEDUCTIO	ons				
 a. Payroll taxes and social se 	ecurity	\$	3,450.00	\$	N/A
b. Insurance		\$	0.00	\$	N/A
c. Union dues		\$	0.00	\$	N/A
d. Other (Specify):		\$	0.00	\$	N/A
_		\$	0.00	\$	N/A
5. SUBTOTAL OF PAYROLL D	DEDUCTIONS	\$	3,450.00	\$	N/A
6. TOTAL NET MONTHLY TA	KE HOME PAY	\$	10,500.00	\$	N/A
	n of business or profession or farm (Attach detailed state	ment) \$	0.00	\$	N/A
8. Income from real property		\$	0.00	\$	N/A
9. Interest and dividends		\$_	0.00	\$	N/A
dependents listed above 11. Social security or government	port payments payable to the debtor for the debtor's use	or that of \$	0.00	\$	N/A
	i assistance	\$	0.00	\$	N/A
		<u> </u>	0.00	\$	N/A
12. Pension or retirement income		\$	0.00	\$	N/A
13. Other monthly income (Specify):		\$	0.00	\$	N/A
(Specify).		\$	0.00	\$	N/A
		<u> </u>		· -	
14. SUBTOTAL OF LINES 7 TH	HROUGH 13	\$	0.00	\$	N/A
15. AVERAGE MONTHLY INC	COME (Add amounts shown on lines 6 and 14)	\$	10,500.00	\$	N/A
16. COMBINED AVERAGE MO	ONTHLY INCOME: (Combine column totals from line	15)	\$	10,500.00	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Official Form 6J) (12/07)

441	9
441	9

				4419
In re	Michael J. Donnelly		Case No.	
		Debtor(s)		

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show expenses calculated on this form may differ from the deductions from income allowed on	,
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate hou expenditures labeled "Spouse."	sehold. Complete a separate schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 6,596.00
a. Are real estate taxes included? Yes X No	
b. Is property insurance included? Yes X No	
2. Utilities: a. Electricity and heating fuel	\$\$
b. Water and sewer	\$\$
c. Telephone	\$150.00
d. Other Cable	\$ 90.00
3. Home maintenance (repairs and upkeep)	\$ 50.00
4. Food	\$ 900.00
5. Clothing	\$ 150.00
6. Laundry and dry cleaning	\$ 35.00
7. Medical and dental expenses	\$ 85.00
8. Transportation (not including car payments)	\$ 200.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 40.00
10. Charitable contributions	\$
11. Insurance (not deducted from wages or included in home mortgage payments)	Φ 0.00
a. Homeowner's or renter's	\$
b. Life	T
c. Health	\$
d. Auto	\$\$ \$ 0.00
e. Other	
12. Taxes (not deducted from wages or included in home mortgage payments)	\$ 0.00
(Specify)	Ψ
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be inc plan)	
a. Auto	\$ 382.00
b. Other	\$ 0.00
c. Other	\$0.00
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your home	\$
16. Regular expenses from operation of business, profession, or farm (attach detailed stat	
17. Other	\$
Other	\$
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	· _ · ·
19. Describe any increase or decrease in expenditures reasonably anticipated to occur wit following the filing of this document:	thin the year
20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$
b. Average monthly expenses from Line 18 above	\$ 9,428.00
c. Monthly net income (a. minus b.)	\$ 1,072.00

B6 Summary (Official Form 6 - Summary) (12/07)

		United States Bankruptcy Court Eastern District of New York		4419
In re	Michael J. Donnelly		Case No.	
_		Debtor		
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	940,000.00		
B - Personal Property	Yes	3	50,200.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		1,014,642.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		3,000.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		278,558.95	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			10,500.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			9,428.00
Total Number of Sheets of ALL Schedu	ıles	19			
	T	otal Assets	990,200.00		
			Total Liabilities	1,296,200.95	

Form 6 - Statistical Summary (12/07)

		United States Bankruptcy Court Eastern District of New York		4419
In re	Michael J. Donnelly		Case No	
_		Debtor		
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. \S 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	3,000.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	3,000.00

State the following:

Average Income (from Schedule I, Line 16)	10,500.00
Average Expenses (from Schedule J, Line 18)	9,428.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	13,950.00

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		35,000.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	3,000.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		278,558.95
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		313,558.95

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court

4419

Eastern District of New York Michael J. Donnelly In re Case No. 13 Debtor(s) Chapter DECLARATION CONCERNING DEBTOR'S SCHEDULES DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 21 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date October 17, 2008 Signature /s/ Michael J. Donnelly Michael J. Donnelly Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court

Eastern	District	of Now	Vork
rasiern	DISTRICT	or new	T OFK

	Eastern Dis	strict of New Yor	·k	
In	n re Michael J. Donnelly		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATI	ION OF ATTO	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in c	petition in bankrupto	y, or agreed to be pai	d to me, for services rendered or to
	For legal services, I have agreed to accept		\$	5,500.00
	Prior to the filing of this statement I have received		\$	2,750.00
	Balance Due		\$ <u></u>	2,750.00
2.	\$ of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	☐ I have not agreed to share the above-disclosed compensation	with any other persor	unless they are mem	bers and associates of my law firm.
	I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the annexed hereto			
6.	In return for the above-disclosed fee, I have agreed to render lega a. Analysis of the debtor's financial situation, and rendering advib. Preparation and filing of any petition, schedules, statement of c. Representation of the debtor at the meeting of creditors and cod. Representation of the debtor in adversary proceedings and othe. [Other provisions as needed] Negotiations with secured creditors to reduce to reaffirmation agreements and applications as no 522(f)(2)(A) for avoidance of liens on household.	ice to the debtor in de affairs and plan whice onfirmation hearing, a her contested bankruph to market value; ex needed; preparation	termining whether to h may be required; and any adjourned heatery termatters;	file a petition in bankruptcy; rings thereof; ; preparation and filing of
7.	By agreement with the debtor(s), the above-disclosed fee does no Representation of the debtors in any discharge any other adversary proceeding.			es, relief from stay actions or
	CERT	TIFICATION		
this	I certify that the foregoing is a complete statement of any agreement is bankruptcy proceeding.	ent or arrangement for	r payment to me for re	epresentation of the debtor(s) in
Dat	ated: October 17, 2008	/s/ Ronald D. We	iss	
	<u> </u>	Ronald D. Weiss Ronald D. Weiss 734 Walt Whitma Suite 203 Melville, NY 1174	s 4419 s, P.C. an Road	
		(631)271-3737 F weiss@ny-bankı	Fax: (631)271-3784 ruptcy.com	

4419

B7 (Official Form 7) (12/07)

United States Bankruptcy Court

4419

Eastern District of New York

In re	Michael J. Donnelly	Case N	0.
		Debtor(s) Chapte	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$80,000.00	Dentist - 2008
\$60,000.00	Dentist - 2007
\$35,616.00	Dentist - 2006

COLIDOR

AMOUNT

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL OWING

2

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR PAYMENTS/ VALUE OF

NAME AND ADDRESS OF CREDITOR

TRANSFERS OWING TRANSFERS

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

AMOUNT STILL

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION Supreme Court of State of STATUS OR DISPOSITION

Banco Popular North America

Verified Complaint

New York

County of Suffolk

Michael J. Donnelly DDS

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

Software Copyright (c) 1996-2007 Best Case Solutions, Inc. - Evanston, IL - (800) 492-8037

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE, DESCRIPTION AND VALUE OF TRANSFER OR RETURN **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN

OF COURT CASE TITLE & NUMBER DATE OF ORDER

DESCRIPTION AND VALUE OF

3

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Ronald D. Weiss, P.C. 734 Walt Whitman Road Suite 203 Melville, NY 11747

DATE OF PAYMENT. NAME OF PAYOR IF OTHER THAN DEBTOR paid \$950 9/5/08 paid \$2,149 9/15/08 (includes \$274 Court \$274.00 Court filing fee paid filing fee \$50 Credit counseling fee)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$2,750.00 Legal fee plus prior to Court filing. \$2,750.00 additional Legal fee to be paid through the Chapter 13 Plan.

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

■ Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL GOVERNMENTAL UNIT NOTICE LAW

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

5

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six vears immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

NAME Michael J. Donnelly DDS PC ADDRESS 914 Wheeler Road Hauppauge, NY 11788 NATURE OF BUSINESS **Dentist**

BEGINNING AND ENDING DATES 4/13/1994 to Present

6

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

7

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

None

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

, ,

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS
TITLE
NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year**

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
DATE AND PURPOSE
OF WITHDRAWAL
OF WITHDRAWAL
OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated

group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	October 17, 2008	Signature	/s/ Michael J. Donnelly	
			Michael J. Donnelly	
			Debtor	

 $Penalty\ for\ making\ a\ false\ statement:\ Fine\ of\ up\ to\ \$500,000\ or\ imprisonment\ for\ up\ to\ 5\ years,\ or\ both.\ 18\ U.S.C.\ \S\$\ 152\ and\ 3571$

R22C	(Official)	Form 22C)	(Chanter	13) (01/08)

In re	Michael J. Donnelly	According to the calculations required by this statement:
	Debtor(s)	\square The applicable commitment period is 3 years.
Case N		■ The applicable commitment period is 5 years.
	(If known)	■ Disposable income is determined under § 1325(b)(3).
		\square Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Par	t I.	REPORT OF INC	COM	ИE				
	Mari	tal/filing status. Check the box that applies ar	nd c	complete the balance	e of	this part of this state	men	t as directed.		
1	a. I	Unmarried. Complete only Column A ("Deb	tor	's Income'') for Li	nes	2-10.				
	b. □	Married. Complete both Column A ("Debto	r's l	Income") and Col	umn	B ("Spouse's Incom	ne'')	for Lines 2-10.	,	
		gures must reflect average monthly income rec						Column A		Column B
		dar months prior to filing the bankruptcy case, ing. If the amount of monthly income varied						Debtor's		Spouse's
		onth total by six, and enter the result on the ap			you	i must divide the		Income		Income
2		s wages, salary, tips, bonuses, overtime, com		•			_		_	
		0 · • • · · · · · · · · · · · · · · · ·				1.0 7: 1	\$	13,950.00	\$	
		ne from the operation of a business, profession the difference in the appropriate column(s) of								
		ssion or farm, enter aggregate numbers and pro								
		er less than zero. Do not include any part of								
3	a ded	uction in Part IV.								
		I.a.		Debtor		Spouse				
	a.	Gross receipts	\$	0.00						
	b. c.	Ordinary and necessary business expenses Business income	\$	btract Line b from	-	. 0	Φ.	0.00	Φ.	
	_						\$	0.00	\$	
		s and other real property income. Subtract I propriate column(s) of Line 4. Do not enter a								
		of the operating expenses entered on Line b								
4				Debtor		Spouse				
	a.	Gross receipts	\$	0.00						
	b.	Ordinary and necessary operating expenses	\$	0.00						
	c.	Rent and other real property income	Sı	btract Line b from	Lin	e a	\$	0.00	\$	
5	Inter	est, dividends, and royalties.					\$	0.00	\$	
6	Pensi	on and retirement income.					\$	0.00	\$	
		amounts paid by another person or entity, o								
7		nses of the debtor or the debtor's dependent								
,		ose. Do not include alimony or separate main	tena	ance payments or a	mou	nts paid by the	Φ.	0.00	Ф	
		r's spouse.	-41	1) (I' 0	\$	0.00	\$	
		inployment compensation. Enter the amount in ever, if you contend that unemployment compe								
		it under the Social Security Act, do not list the								
8		but instead state the amount in the space below								
	Uner	mployment compensation claimed to								
		benefit under the Social Security Act Debtor	\$	0.00 Spe	ouse	\$	\$	0.00	\$	

9	Income from all other sources. Specify source and on a separate page. Total and enter on Line 9. Do not maintenance payments paid by your spouse, but separate maintenance. Do not include any benefit payments received as a victim of a war crime, crime international or domestic terrorism.	not include alimony include all other pay ts received under the	or separate yments of alimony or Social Security Act or			
		Debtor	Spouse			
	a. \$ b. \$		\$ \$	\$ 0.0	n	
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if 0 in Column B. Enter the total(s).	Column B is complet	т	\$ 13,950.0	00 \$	
11	Total. If Column B has been completed, add Line 1 the total. If Column B has not been completed, ento			\$		13,950.00
	Part II. CALCULATION	OF § 1325(b)(4) COMMITMENT I	PERIOD		
12	Enter the amount from Line 11				\$	13,950.00
13	Marital Adjustment. If you are married, but are no calculation of the commitment period under § 1325 enter on Line 13 the amount of the income listed in the household expenses of you or your dependents a income (such as payment of the spouse's tax liability debtor's dependents) and the amount of income devon a separate page. If the conditions for entering the a.	(b)(4) does not requi Line 10, Column B (and specify, in the lir y or the spouse's supported to each purpose	re inclusion of the income that was NOT paid on a re- nes below, the basis for ex- port of persons other than . If necessary, list addition	of your spouse, gular basis for cluding this the debtor or the		
	b.	\$				
	[c.]	\$				
	Total and enter on Line 13				\$	0.00
14	Subtract Line 13 from Line 12 and enter the resu	ılt.			\$	13,950.00
15	Annualized current monthly income for § 1325(b enter the result.	(4). Multiply the ar	nount from Line 14 by the	number 12 and	\$	167,400.00
16	Applicable median family income. Enter the media information is available by family size at <a applicab<="" href="https://www.usdo.com/www.usdo.co</td><td>oj.gov/ust/ or from the</td><td>e clerk of the bankruptcy of</td><td></td><td></td><td></td></tr><tr><td></td><td>a. Enter debtor's state of residence: NY</td><td></td><td>otor's household size:</td><td>4</td><td>\$</td><td>79,966.00</td></tr><tr><td>17</td><td>Application of § 1325(b)(4). Check the applicable ☐ The amount on Line 15 is less than the amount op of page 1 of this statement and continue with The amount on Line 15 is not less than the amount of page 1 of this statement and continue with the top of page 1 of this statement and continue the top of the top</td><td>t on Line 16. Check h this statement.</td><td>the box for " td="" the=""><td></td><td></td><td></td>					
	Part III. APPLICATION OF § 13	25(b)(3) FOR DETI	ERMINING DISPOSAB	LE INCOME		
18	Enter the amount from Line 11.				\$	13,950.00
19	Marital Adjustment. If you are married, but are no any income listed in Line 10, Column B that was Not debtor or the debtor's dependents. Specify in the lin payment of the spouse's tax liability or the spouse's dependents) and the amount of income devoted to e separate page. If the conditions for entering this adjust.	OT paid on a regular res below the basis for support of persons of each purpose. If necessustment do not apply	basis for the household expression excluding the Column B ther than the debtor or the ssary, list additional adjust	spenses of the income(such as debtor's		
	c.	\$				
	Total and enter on Line 19.				\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract	ct Line 19 from Line	18 and enter the result.		\$	13.950.00

21		alized current monthly inc	ome for § 1325(b)(3). I	Multip	oly the a	mount from Line 2	0 by the number 12 and	\$	167,400.00
22	Appli	cable median family incom	e. Enter the amount fro	m Lin	e 16.			\$	79,966.00
	Appli	cation of § 1325(b)(3). Che	ck the applicable box a	nd pro	ceed as	directed.		Ψ	70,000.00
23		e amount on Line 21 is mo 25(b)(3)" at the top of page						nined ı	under §
		e amount on Line 21 is not 25(b)(3)" at the top of page							
		Part IV. Ca	ALCULATION (OF I	DEDU	CTIONS FR	OM INCOME		
		Subpart A: D	eductions under Sta	ndar	ds of th	e Internal Reve	nue Service (IRS)		
24A	Enter applic	nal Standards: food, appar in Line 24A the "Total" ame able household size. (This aptcy court.)	ount from IRS National	Stand	ards for	Allowable Living	Expenses for the	\$	1,370.00
24B	Pocke Health clerk of age number obtain b2 to o	thealth Care for persons und Care for persons 65 years of the bankruptcy court.) End, and enter in Line b2 the number of household members may a total amount for household at total amount for household batain a total health care amount for household health health care amount for household health heal	nder 65 years of age, and of age or older. (This inter in Line b1 the numb amber of members of youst be the same as the nuld members under 65, a usehold members 65 an ount, and enter the resu	d in L forma er of the our ho umber and ent d olde lt in L	ine a2 the tion is a member usehold stated in terms the rear, and e time 24B	ne IRS National Stavailable at www.us of your household who are 65 years on Line 16b.) Multipesult in Line c1. Mater the result in Line characters.	andards for Out-of-Pocket sdoj.gov/ust/ or from the d who are under 65 years of age or older. (The total ply Line al by Line bl to ultiply Line a2 by Line ine c2. Add Lines c1 and		
	Hous	ehold members under 65 y			1	members 65 years			
	a1.	Allowance per member	57		1	ance per member	144		
	b1.	Number of members Subtotal	228.00		Number	er of members	0.00		
	<u> </u>							\$	228.00
25A	Utiliti	Standards: housing and u es Standards; non-mortgage ble at www.usdoj.gov/ust/ o	expenses for the applic	able c	ounty a	nd household size.		\$	715.00
25B	Housi availa Month	Standards: housing and ung and Utilities Standards; not ble at www.usdoj.gov/ust/ only Payments for any debts soult in Line 25B. Do not en	mortgage/rent expense for from the clerk of the becured by your home, a	or you ankru s state	ir count iptcy co ed in Lii	y and household si urt); enter on Line	ze (this information is b the total of the Average		
	a.	IRS Housing and Utilities				\$	1,849.00		
	b.	Average Monthly Payment home, if any, as stated in L	ine 47	y you	Г	\$	6,596.00		
	c.	Net mortgage/rental expen				Subtract Line b fr		\$	0.00
26	25B d Standa	Standards: housing and u oes not accurately compute ards, enter any additional an ation in the space below:	the allowance to which	you a	re entitl	ed under the IRS H	Iousing and Utilities		
		*						\$	0.00

B22C (Official Form 22C) (Chapter 13) (01/08)

	Local Standards: transportation; vehicle operation/public transportation allowance in this category regardless of whether you pay the regardless of whether you use public transportation.		n	
27A	Check the number of vehicles for which you pay the operating expenincluded as a contribution to your household expenses in Line 7.		s are	
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in th Census Region. (These amounts are available at www.usdoj.gov/ust/	unt from IRS Local Standards: e "Operating Costs" amount from IRS a e applicable Metropolitan Statistical A	rea or	\$ 560.00
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public T Standards: Transportation. (This amount is available at www.usdoj.gcourt.)	you are entitled to an additional deduction are entitled to an additional deduction are unable to an additional deduction.	ction for ocal	\$ 0.00
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.) □ 1 ■ 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the	ship/lease expense for more than two e IRS Local Standards: Transportation		
28	(available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Lithe result in Line 28. Do not enter an amount less than zero.			
	a. IRS Transportation Standards, Ownership Costs	\$	489.00	
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47	\$	382.24	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.		\$ 106.76
29	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from th (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Line result in Line 29. Do not enter an amount less than zero.	court); enter in Line b the total of the aine 47; subtract Line b from Line a and	Average l enter	
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$	489.00	
	b. 2, as stated in Line 47	\$	0.00	
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.		\$ 489.00
30	Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sales	come taxes, self employment taxes, so		\$ 3,450.00
31	Other Necessary Expenses: mandatory deductions for employmen deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volumes.	retirement contributions, union dues,		\$ 0.00
32	Other Necessary Expenses: life insurance. Enter total average mor life insurance for yourself. Do not include premiums for insurance any other form of insurance.			\$ 0.00
33	Other Necessary Expenses: court-ordered payments. Enter the top pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.			\$ 0.00
34	Other Necessary Expenses: education for employment or for a ph			
	education that is required for a physically or mentally challenged dep providing similar services is available.	ion that is a condition of employment endent child for whom no public educ		\$ 0.00
35	education that is required for a physically or mentally challenged dep	endent child for whom no public educ	ation on	\$ 0.00

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36	Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$	0.00
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$	0.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$	6,918.76
	Subpart B: Additional Living Expense Deductions		
	Note: Do not include any expenses that you have listed in Lines 24-37		
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents		
39	a. Health Insurance \$ 0.00		
	b. Disability Insurance \$ 0.00		
	c. Health Savings Account \$ 0.00		
	Total and enter on Line 39	\$	0.00
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$		
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.	\$	0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$	0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$	0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$	0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$	0.00
	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable	Ψ.	0.50
45	contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$	0.00

Subpart C: Deductions for Debt Payment

Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.

	Name of Creditor	Property Securing the Debt		Average	Does payment
				Ionthly ayment	include taxes or insurance
		husiness lean, arrears an	Г	ayment	of msurance
		business loan; arrears on \$1,600/mth since apprx 5/2008;			
		secured by dental office at 914			
	Banco Popular North	Wheeler Rd Hauppauge NY;			
a.	America	apprx reinstatement \$11,000	\$	1,600.00	□yes ■no
		business line; arrears on apprx			
		\$600/mth apprx reinstatement			
		\$4,000; secured by dental office			
1	Banco Popular North	at 914 Wheeler Rd Hauppauge	Φ.	COO 00	□yes ■no
b.	America	NY	\$	600.00	□yes ■no
		2003 4 Winds Chateau 31P Class C RV; current on			
c.	Bank of the West	\$382.24/mth; Solely liable	\$	382.24	□yes ■no
<u>.</u>	Bunk of the West	Single Family Residence	Ψ	002.24	
		(Former Primary Residence);6			
		Cobblestone La, Lake Grove			
		NY; 3 mths arrears on			
		\$6,596/mth(w/escrows) apprx			
		reinstatement \$21,000; Jointly			
		liable w/ex-wife; (to be transferred to ex-wife in divorce			
d.	Chase Financial	stipulation)	\$	6,596.00	■yes □no
u.	Onase i manciai	Single Family Rental	Ψ	0,330.00	yes _
		Property;42 Washburn St, Lake			
		Grove NY; 3 months arrears on			
		\$2,915/mth (w/escrows) apprx			
		reinstatement \$10,000; Jointly			
		liable w/ex-wife; Intends to	_		
e.	Citibank Financial	surrender	\$	2,915.00	■yes □no
			Tota	al: Add Lines	

Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.

	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount
a.	Banco Popular North America	business loan; arrears on \$1,600/mth since apprx 5/2008; secured by dental office at 914 Wheeler Rd Hauppauge NY; apprx reinstatement \$11,000	\$ 183.33
	Banco Popular North	business line; arrears on apprx \$600/mth apprx reinstatement \$4,000; secured by dental office at 914 Wheeler Rd Hauppauge	
b.	America	NY	\$ 66.67
		Single Family Residence (Former Primary Residence);6 Cobblestone La, Lake Grove NY;	
c.	Chase Financial	3 mths arrears on	\$ 350.00

48

			\$6,596/mth(w/escrows) apprx reinstatement \$21,000; Jointly liable w/ex-wife; (to be transferred to ex-wife in divorce stipulation)			
	d.	Citibank Financial	Single Family Rental Property;42 Washburn St, Lake Grove NY; 3 months arrears on \$2,915/mth (w/escrows) apprx reinstatement \$10,000; Jointly liable w/ex-wife; Intends to surrender	\$ 16	66.67	
	Povn	nants on prapatition priority els	ims. Enter the total amount, divided by	Total: Add 1		766.67
49	prior	ity tax, child support and alimony nclude current obligations, such	claims, for which you were liable at the	time of your bankruptcy filin	ng. Do	50.00
		pter 13 administrative expenses. ting administrative expense.	Multiply the amount in Line a by the an	nount in Line b, and enter the	:	
50	a. b.	issued by the Executive Office	strict as determined under schedules of truited States Trustees. (This www.usdoj.gov/ust/) or from the clerk of	-,	5.00	
	c.		ve expense of Chapter 13 case T	Cotal: Multiply Lines a and b	\$	102.50
51	Total	l Deductions for Debt Payment.	Enter the total of Lines 47 through 50.		\$	13,012.41
			1 (5 75 (15 1 (1 6	-		
		S	ubpart D: Total Deductions fro	m Income		
52	Total		Enter the total of Lines 38, 46, and 51.	m Income	\$	19,931.17
52	Total	l of all deductions from income.	_			19,931.17
52		l of all deductions from income.	Enter the total of Lines 38, 46, and 51. NATION OF DISPOSABLE INC.			19,931.17 13,950.00
	Total Supp	Part V. DETERMIN I current monthly income. Enter cort income. Enter the monthly a ments for a dependent child, repor	Enter the total of Lines 38, 46, and 51. NATION OF DISPOSABLE IN the amount from Line 20. Everage of any child support payments, for the in Part I, that you received in accordance.	COME UNDER § 1325	5(b)(2) \$ lity rruptcy	13,950.00
53	Total Supp paym law, t	Part V. DETERMIN I current monthly income. Enter Boort income. Enter the monthly a Benefit for a dependent child, report to the extent reasonably necessary	Enter the total of Lines 38, 46, and 51. NATION OF DISPOSABLE IN the amount from Line 20. Enter the amount from Line 20. Enter the total of Lines 38, 46, and 51. In the amount from Line 20. Enter the total of Lines 38, 46, and 51. In the amount from Line 20. Enter the total of Lines 38, 46, and 51.	COME UNDER § 1325 ester care payments, or disabilence with applicable nonbank	\$ lity ruptcy \$	
53	Total Supp paym law, t Qual wage	Part V. DETERMIN I current monthly income. Enter Boort income. Enter the monthly a Benefit for a dependent child, report to the extent reasonably necessary lified retirement deductions. En	Enter the total of Lines 38, 46, and 51. NATION OF DISPOSABLE INC The amount from Line 20. Everage of any child support payments, for the ted in Part I, that you received in accordary to be expended for such child. Exter the monthly total of (a) all amounts we tirement plans, as specified in § 541(b)(7).	COME UNDER § 1325 ster care payments, or disabilance with applicable nonbanks vithheld by your employer from	\$ lity ruptcy \$ om	13,950.00
53	Total Supp paym law, t Qual wage loans	Part V. DETERMINION I current monthly income. Enter the monthly and the state of the extent reasonably necessary lified retirement deductions. Enter the monthly and the extent reasonably necessary lified retirement deductions. Enter the state of the extent retirement deductions are from retirement plans, as specifically as the state of the extent retirement plans, as specifically as the extent retirement plans, as specifically as the extent of the extent retirement plans, as specifically as the extent retirement plans.	Enter the total of Lines 38, 46, and 51. NATION OF DISPOSABLE INC The amount from Line 20. Everage of any child support payments, for the ted in Part I, that you received in accordary to be expended for such child. Exter the monthly total of (a) all amounts we tirement plans, as specified in § 541(b)(7).	come under § 1325 ster care payments, or disabilation with applicable nonbank withheld by your employer from and (b) all required repayments.	\$ lity ruptcy \$ om nents of	13,950.00 0.00
53 54 55	Total Supp paym law, to Qual wage loans Total Deduthere If nec provided the provide	Part V. DETERMIN I current monthly income. Enter cort income. Enter the monthly a ments for a dependent child, report to the extent reasonably necessary diffied retirement deductions. Enter as as contributions for qualified retirement plans, as specifical of all deductions allowed under contribution for special circumstances is no reasonable alternative, descriptions on reasonable alternative, descriptions on the contribution of the contr	Enter the total of Lines 38, 46, and 51. NATION OF DISPOSABLE INC The amount from Line 20. Everage of any child support payments, for the ted in Part I, that you received in accordary to be expended for such child. Exter the monthly total of (a) all amounts we tirement plans, as specified in § 541(b)(7) and in § 362(b)(19).	ester care payments, or disabilance with applicable nonbank withheld by your employer from and (b) all required repayments for sulting expenses in lines and the total in Line 57. Yourst provide a detailed explain	sility rruptcy \$ omments of \$ sr which below. u must	13,950.00 0.00 0.00
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B22C (Official Form 22C) (Chapter 13) (01/08)

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

| Expense Description | Monthly Amount |

	Expense Description	Monthly Amount
a.		\$
b.		\$
c.		\$
d.		\$
	Total: Add Lines a, b, c and d	\$

	Part	VII	VERIFI	CATION
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I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.)

Date: October 17, 2008 Signature: /s/ Michael J. Donnelly

Michael J. Donnelly (Debtor)

61

60

9

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 04/01/2008 to 09/30/2008.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Dentist

Income by Month:

6 Months Ago:	04/2008	\$13,950.00
5 Months Ago:	05/2008	\$13,950.00
4 Months Ago:	06/2008	\$13,950.00
3 Months Ago:	07/2008	\$13,950.00
2 Months Ago:	08/2008	\$13,950.00
Last Month:	09/2008	\$13,950.00
	Average per month:	\$13,950.00

United States	Bankrupt	cy Court
Eastern Dist	rict of New	York

4419

In re	Michael J. Donnelly		Case No.	
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

USBC-44 Rev. 9/17/98

Internal Revenue Service 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201

NYS Dept of Taxation & Finance Bankruptcy Unit-TCD Bldg 8 Room 455 W. A Harriman State Campus Albany, NY 12227

NYS Department of Taxation & Finance Bankruptcy Unit PO Box 5300 Albany, NY 12205

United States Attorney Attn: Chief of Bankruptcy Litigation One Pierrepont Plaza 4th Floor Brooklyn, NY 11201

US Department of Justice Tax Division Box 55 Ben Franklin Station Washington, DC 20044

State of New York Office of the Attorney General 120 Broadway New York, NY 10271

AMEX POBox 297871 Fort Lauderdale, FL 33329

AMEX PO Box 2855 New York, NY 10116-2855

AMEX POBox 2855 New York, NY 10116-2855 Astoria Federal Savings PO Box 5704 Hicksville, NY 11802-5704

AT&T Mobility PO Box 537113 Atlanta, GA 30353-7113

ATT Universal Card PO Box 182564 Columbus, OH 43218-2564

Banco Popular North America c/o Jaspan Schlesinger Hoffman LLP 300 Garden City Plaza Garden City, NY 11530

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Bank of America PO Box 7047 Dover, DE 19903

Bank of America PO Box 535310 Atlanta, GA 30353-5310

Bank of America PO Box 15019 Wilmington, DE 19886-5019

Bank of the West 1450 Treat Blvd Walnut Creek, CA 94596

Capital One Visa PO Box 70884 Charlotte, NC 28272-0884 Chase 201 N Walnut Street Wilmington, DE 19801

Chase Visa PO Box 15153 Wilmington, DE 19886-5153

Chase Financial 10790 Rancho Berna San Diego, CA 92127

Chase Overdraft PO Box 15133 Wilmington, DE 19886-5153

Chase Visa PO Box 15153 Wilmington, DE 19886-5153

Citibank Financial 10801 6th Street Rancho Cucamonga, CA 91730

Comp USA Retail Services PO Box 17298 Baltimore, MD 21297-1298

Dell Financial Services PO Box 6403 Carol Stream, IL 60197-6403

Discover Card Services PO Box 30395 Salt Lake City, UT 84130-0395

GE Money Bank PO Box 960061 Orlando, FL 32896-0061

GM Card HSBC Card Services PO Box 37281 Baltimore, MD 21297-3281 Home Depot Credit Services Processing Center Des Moines, IA 50364-0500

Optima Platinum Card PO Box 2855 New York, NY 10116-2855

Universal/Citi 8787 Baypines Jacksonville, FL 32201

Wells Fargo Financial PO Box 98784 Las Vegas, NV 89193-8784

Disclosure Pursuant to 11 U.S.C. §527(a)(2)

You are notified:

- 1. All information that you are required to provide with a petition and thereafter during a case under the Bankruptcy Code is required to be complete, accurate, and truthful.
- 2. All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case. Some places in the Bankruptcy Code require that you list the replacement value of each asset. This must be the replacement value of the property at the date of filing the petition, without deducting for costs of sale or marketing, established after a reasonable inquiry. For property acquired for personal, family, or household use, replacement value means the price a retail merchant would charge for property of that kind, considering the age and condition of the property.
- 3. The following information, which appears on Official Form 22, Statement of Current Monthly Income, is required to be stated after reasonable inquiry: current monthly income, the amounts specified in section 707(b)(2), and, in a case under chapter 13 of the Bankruptcy Code, disposable income (determined in accordance with section 707(b)(2)).
- 4. Information that you provide during your case may be audited pursuant to provisions of the Bankruptcy Code. Failure to provide such information may result in dismissal of the case under this title or other sanction, including criminal sanctions.